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ABSTRACT

This brief speech discusses the correlation between nutrition and health among older adults. Food habits of older people do not always fall in line with their food needs and health condition. Therefore, there is a need to establish nutrition programs to help older adults, as well as others, learn how to regulate their diet. The speaker challenges the prevalence of various food myths, such as the notion that processed food has fewer nutrients than natural foods. People should be careful about the sources from which they receive their information concerning food. (SE)

YOU ARE WHAT YOU EAT - FOOD

By Polly White

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NATIONAL INSTITUTE OF EQUICATION EQUICATION THIS DOCUMENT HAS BEEN REPRODUCED EXACTLY AS RECEIVED FROM THE PERSON OR ORGANIZATION ORIGIN ATING IT POINTS OF VIEW OR OPINIONS STATED DO NOT NECESSARILY REPRESENT OF FICIAL NATIONAL INSTITUTE OF EDUCATION POSITION OR POLICY

Sound nutrition in the mature person\and the older adult is not fundamentally different from normal nutrition in earlier years. However, because the aging process gives each age group unique characteristics, geriatric nutrition is worthy of special consideration. Gerontology emphasizes keys to health for the older adult; nutrition, mental hygiene, adequate housing, a safe living environment, moderate well-balanced personal habits, recreation, a useful and productive role in society and a sense of personal security. Good nutrition is allied with all of-these - in fact, it is of the first importance in realizing some of the satisfactions that come with age. Geriatric nutrition is concerned with conserving health with advancing years and with the delay of some of the degenerative changes that are associated with aging. The time to start practicing good nutrition for the later years is in young adulthood - better still in childhood. Anyadult's nutrition must be considered in terms of the past, the present and the future. The nutritional state of a person reflects not only his current food practices but all of his previous dietary history as well. The older a person grows, the longer and more complex is his dietary history. The variations in nutritional status and dietary needs of a group of adults are bound to be greater than corresponding variations in a group of young people. The food needs of the older age group must be pointed especially to the needs of individuals.

The same nutritional principles that describe adequate diets for earlier periods of life apply to the diets of adults. Even though the adult has grown up - matured - his basic food supply still must provide all the nutrients necessary for maintaining body structure and for operating its machinery.

Good nutrition is only one of the practices which help to maintain strength and vigor, but it can be practiced three times a day - and it is abused more frequently than any other. The delicate organs and tissues of the body continue to do their respective jobs for many decades if given half a chance. No one expects a man-made machine to last as long as that without special care and renewal of parts. Nature has a remarkable ability to repair or compensate for worn-out parts if given the opportunity and the right materials. It has been demonstrated repeatedly that older people can adjust to circumstances, learn new skills and adopt new food habits. "Never to old to learn" is a far truer adage than "You can't teach an old dog new tricks".

Food habits of older people do not always fall in line with their food needs. Surveys of food choices have shown that there is a marked decrease in consumption of meat and milk and an increased use of eggs but no caloric deficit. Factors that affect the food habits of older and retired people are: social situation (over half live alone), reduced income, limited cooking and refrigeration facilities, marketing difficulties, condition of the teeth, sense of smell, problems of swallowing, food faddism and long-standing misconceptions concerning what constitutes good nutrition.

We recognize that the people whom we are serving through our nutrition programs are here because "they must have done something right". The overall emphasis of Nutrition Education today is being directed toward early, and continuing education as a part of the overall school program. However, we have a large percentage of the total population that have not had an opportunity to participate in formal nutrition education. With the current interest in food - nutrition, ecology, natural foods, health foods, weight control, cholesteral, and many other facets of this field there is an over abundance of information. This information is



coming to us and at us from all the scientific journals, the popular magazines. the daily newspaper, TV commercials, radio billboards, and many other sources. This information can be conflicting and confusing and designed to get your attention and in many instances sell a product. This can create an atmosphere in which the brightest picture, the largest budget or the loudest voice gets_ the point across. Sometimes it appears that everyone is in the business of teaching nutrition. One problem is that much of what is taught is fact and much is fancy, and the initiated have no way of telling the difference; the other problem is that what is taught falls on deaf ears. People are exposed to nutrition education, both through example and instruction, through family experience, cultural indoctrination and the framework of formal education. The food industry, the pharmaceutical industry, adult education teachers, and federal agencies are all in the business of teaching nutrition. People tend to be susceptible to nutrition education at several stages of their lives: when they are young children and receptive to advice from parents and adults; when they become aware of the responsibility for the health of their own children; and when they realize that they are not going to live forever and that their own state of health might in some way be related to nutrition. The latter often requires a transforming enlightenment that may dawn at any time or never.

Food misinformation is the modern version of primitive superstitions and taboos. Many old wives tales prevail, and although they sound more believable because they are contemporary they are still based on theory, supposition, and wishful thinking. They should not be ignored because they are often decidedly more influential in directing behavior than are nutritional facts learned through formal education.

Such of what people understand or believe to be true about nutrition they learn from each other. Everyone, after all; has spent a large part of his life eating or recovering from the effects of eating, and thereby feels qualified to speak as an expert and advise others on the subject. A large body of information deliberately attempts (and with a fair degree of success) to destroy public confidence in the food supply. A favorite technique is to borrow facts from legitimate scientific research and weave them into bizarre theories that sound credible to the uninitiated.

This has been done by using scare tactics - emphasis placed on use of insecticides that is polluting all of our food supply. Emphasis on the idea that all nutrients have been removed from the food by processing - ex. flour. Food additives that are adding chemicals to the diet.

As an example of these: Flour that has been bleached and refined to white flour should not be used because the nutritional value has been removed and harmful chemicals have been added during the bleaching process. In the processing of flour bleaching does not harm the nutritive value. Bran and germ are removed from the wheat in the milling process. Enriched flour has thimin, riboflavin, niacin, and iron added to equal or better than levels of the nutrients in the whole grain. White flour, enriched or unenriched contributes some protein.

The body metabolism does not distinguish between organic and synthetic vitamins since all nutrients are broken down to their chemical components before they can be utilized by the body.

The success of such propaganda lies partly in the normal concern that people have about their health. By insisting that all diseases are the result of faulty diet, and that subclinical vitamin deficiencies of various nutrients prevent the



rattainment of full physical and mental powers, the impression is created that we are, all being victimized by the need to eat. It is generally believed that legislation prevents the dissemination of false and misleading information about nutrition through lectures or publications of various kinds.

However, this is not the case. Anyone can write whatever they can get published and without any verification of information in their writings. All is needed is that it sound convincing.

Beginning in January 1975 new labeling went into effect that requires precise information on the amount of calorics. I putrients in each serving. These nutrients are given in terms of U.S.R.D.A. which means the United States Recommended Daily Allowance for the nutrients for which the amounts have been established. Percentages of at least seven nutrients must be given. These are Vitamin A and C, thiamin, riboflavin, niacin, calcium and iron. If a single serving contains less than 2% of R.D.A. requirement it will either be listed as an "O" or marked with an asterisk.

The possibility of choosing an adequate diet is dependent to a considerable degree on the availability of food. On a national scale this is a matter of agriculture, economics, and technology. To an individual it involves the extent of purchasing power and the knowledge of how to make the best use of available funds and facilities.

Anyone who is able to choose an adequate diet must first have sufficient access to food and the meals of storing, preserving and preparing it. In addition he needs information that will enable him to choose nutritionally appropriate combinations of foods in a manner that makes the most effective use of the food facilities available. Finally and perhaps the most important, he must have the personal motivation to use his material and educational resources to further his health and well being.

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